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NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 07/36141D

Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	Total
Basic Filing Fee	<u>201/101</u>					<u>760</u>
Total Claims >20	<u>203/103</u>	<u>0</u>	-20 =	X		
Independent Claims >3	<u>202/102</u>	<u>0</u>	-3 =	X		
Multi Dep Claim Present	<u>204/104</u>					
Surcharge	<u>205/105</u>					<u>120</u>
English Translation	<u>139</u>					<u>130</u>

TOTAL FEE CALCULATION

1020

Fees due upon filing the application:

Total Filing Fees Due =

\$ 1020

Less Filing Fees Submitted

- \$ 6

BALANCE DUE

= \$ 1020

Smc

Office of Initial Patent Examination

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or Docket Number

09 | 36 | 610

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	0 7 minus 20 = *	
INDEPENDENT CLAIMS	6 minus 3 = *	
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	*	Minus	** 20	= /
Independent	*	2	Minus	*** 3	= /
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

SMALL ENTITY
TYPE

OTHER THAN
SMALL ENTITY

RATE	FEES	RATE	FEES
	380.00		760.00
OR X\$ 9=		OR X\$18=	
OR X39=		OR X78=	
OR +130=		OR +260=	
TOTAL		TOTAL	760

SMALL ENTITY OR

OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	*	Minus	**	=
Independent	*		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	*	Minus	**	=
Independent	*	10	Minus	** 20	= /
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	See 1a
+260=	
TOTAL ADDIT. FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.